

DECLARATION AND POWER OF ATTORNEY
(Original Application)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

Splittable Multiple Catheter Assembly

the specification of which is attached hereto and/or was filed on _____ as Application No. _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to herein.

I acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d), of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

FOREIGN PRIORITY APPLICATION(S)

<hr/>	<hr/>	Priority Claimed
(Number)	(Country)	<input type="checkbox"/> Yes <input type="checkbox"/> No
(Day/month/year filed)		
<hr/>		
(Number)	(Country)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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PROVISIONAL PRIORITY PATENT APPLICATION(S)

		<u>Priority Claimed</u>
<u>60/422,726</u>	<u>October 31, 2002</u>	<u>[X] Yes [] No</u>
(Application No.)	(Filing Date)	
<u>60/423,002</u>	<u>November 1, 2002</u>	<u>[X] Yes [] No</u>
(Application No.)	(Filing Date)	

And I hereby appoint Joseph E. Maenner, Esquire, Registration No. 41,964, as my attorney or agent with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence to **Joseph E. Maenner, Esquire, Monte & McGraw, P.C., 4092 Skippack Pike, P.O. Box 650, Skippack, PA 19474**. Please direct all communications and telephone calls to **Joseph E. Maenner** at 610-584-9400.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole
inventor, if any J. Daniel Raulerson, M.D.

Inventor's Signature _____

Date _____

Residence Brewton, AL

Citizenship US

Post Office Address 1205 Belleville Avenue, Brewton, AL 36426

Full name of second joint
inventor, if any John Stephens

Inventor's Signature _____

Date _____

Residence Perkiomenville, PA

Citizenship US

Post Office Address 845 Kulp Road, Perkiomenville, PA 18074

Full name of third joint
inventor, if any Mahase Nardeo

Inventor's Signature 

Date 10/27/2003

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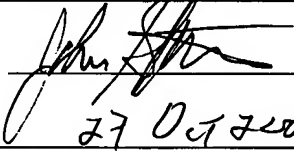
Date _____

Residence Brewton, AL

Citizenship US

Post Office Address 1205 Belleville Avenue, Brewton, AL 36426

Full name of second joint
inventor, if any John Stephens

Inventor's Signature  _____

Date 27 Oct 2003

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Citizenship US

Post Office Address 845 Kulp Road, Perkiomenville, PA 18074

Full name of third joint
inventor, if any Mahase Nardeo

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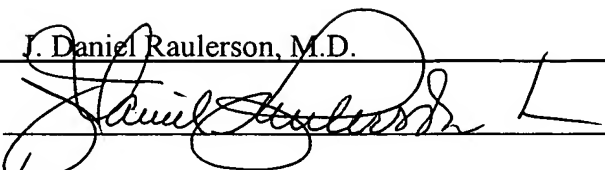
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